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jc639 U.S. PTO

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Daniel et al.

Serial No.: unknown

Filed: December 12, 2000

For: DISTAL PROTECTION DEVICE AND METHOD

Docket No.: 1001.1351106

Examiner in immediately preceding parent application: Lewis, W.

Anticipated Group Art Unit: 3731

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TRANSMITTAL SHEET

The Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

**CERTIFICATE UNDER 37 C.F.R. 1.10:** The undersigned hereby certifies that this paper or papers, as described herein, are being deposited in the United States Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of: EL595467806US, in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C., 20231 on this 12th day of December, 2000.

By Lisa A. Dahline

Lisa A. Dahline

We are transmitting herewith the attached Continuation Patent Application under 37 CFR §1.53(b), including the following:

[X] 39 sheet(s) of specification.

[X] 11 sheet(s) of claim(s).

[X] 1 sheet(s) of Abstract.

[X] 16 sheet(s) of informal drawings.

[X] Executed Declaration and Power of Attorney.

[ ] A verified statement(s) to establish small entity status under 37 C.F.R. 1.9 and/or 1.27 is enclosed.

[ ] An Assignment of the invention to \_\_\_\_\_ is being filed contemporaneous with this patent application.

[ ] A certified copy of a \_\_\_\_\_ application, serial no. \_\_\_\_\_, filed \_\_\_\_\_, 19\_\_\_\_\_, the right of priority of which is claimed under 35 U.S.C. 119.

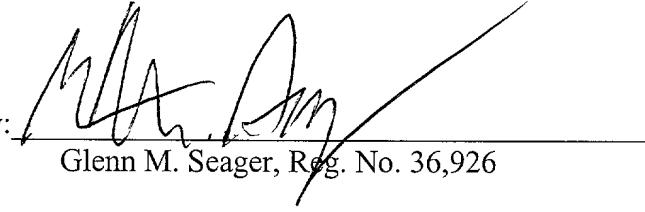
CLAIMS AS FILED						
	(1)	(2)	SMALL ENTITY		OTHER	
FOR:	# FILED	# EXTRA	Rate	Fee	Rate	Fee
BASIC FEE				\$355		\$710
TOTAL CLAIMS	1 -20 =		x9=	\$	x18=	\$0
INDEPENDENT CLAIMS	1 -3 =		x40=	\$	x80=	\$0
( ) MULTIPLE DEPENDENT CLAIM PRESENTED			+135=	\$	+270=	\$0
TOTAL			\$		\$710.00	

\*If the difference in Column (1) is less than zero, enter "0" in Column 2.

Other Revocation of Prior Powers of Attorney and Power of Attorney and sixteen (16) sheets of formal drawings.

A check in the amount of \$ 710.00 is enclosed.

Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account No. 50-0413.

By: 

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